

CHAPTER 1 INTRODUCTION

Title 15 - Mississippi Department of Health

Part VIII – Office of Health Policy and Planning

Subpart 90 – Planning and Resource Development

Chapter 01 Introduction

100 Legal Authority and Purpose

Section 41-7-171 et seq., Mississippi Code 1972 Annotated, as amended, established the Mississippi State Department of Health (MSDH) as the sole and official agency to administer and supervise all health planning responsibilities for the state, including development and publication of the Mississippi State Health Plan. The effective dates of the Fiscal Year 2014 Mississippi State Health Plan extend from December 2, 2014, through December 1, 2015, or until superseded by a later Plan.

The 2015 State Health Plan establishes criteria and standards for health-related activities which require Certificate of Need review in an effort to meet the priority health needs identified by the department. The priority health needs are as follows:

- Disease prevention, health protection, and health promotion;
- Health care for specific populations, such as mothers, babies, the elderly, the indigent, the uninsured, and minorities;
- Implementation of a statewide trauma system;
- Health needs of persons with mental illness, alcohol/drug abuse problems, mental retardation/developmental disabilities, and/or handicap;
- Availability of adequate health manpower throughout the state; and
- Enhance capacity for detention of a response to public health emergencies, including acts of bioterrorism.

Section 41-7-191, Mississippi Code 1972 Annotated, as amended, requires Certificate of Need (CON) approval for the establishment, relocation, or expansion of health care facilities. The statute also requires CON approval for the acquisition or control of major medical equipment and for the change of ownership of defined health care facilities unless the facilities meet specific requirements.

This *Plan* provides the service-specific CON criteria and standards developed and adopted by the MSDH for CON review of health-related activities requiring such review. The *Mississippi Certificate of Need Review Manual* provides additional general CON criteria by which the Department reviews all applications.

101 General Certificate of Need Policies

Mississippi's health planning and health regulatory activities have the following purposes:

- To improve the health of Mississippi residents;
- To increase the accessibility, acceptability, continuity, and quality of health services;
- To prevent unnecessary duplication of health resources; and
- To provide some cost containment.

The MSDH intends to approve an application for CON if it substantially complies with the projected need and with the applicable criteria and standards presented in this *Plan*, and to disapprove all CON applications which do not substantially comply with the projected need or with applicable criteria and standards presented in this *Plan*.

The MSDH intends to disapprove CON applications which fail to confirm that the applicant shall provide a reasonable amount of indigent care, or if the applicant's admission policies deny or discourage access to care by indigent patients. Furthermore, the MSDH intends to disapprove CON applications if such approval would have a significant adverse effect on the ability of an existing facility or service to provide indigent care. Finally, it is the intent of the Mississippi State Department of Health to strictly adhere to the criteria set forth in the *State Health Plan* and to ensure that any provider desiring to offer healthcare services covered by the Certificate of Need statutes undergoes review and is issued a Certificate of Need prior to offering such services.

The State Health Officer shall determine whether the amount of indigent care provided or proposed to be offered is "reasonable." The Department considers a reasonable amount of indigent care as that which is comparable to the amount of such care offered by other providers of the requested service within the same, or proximate, geographic area.

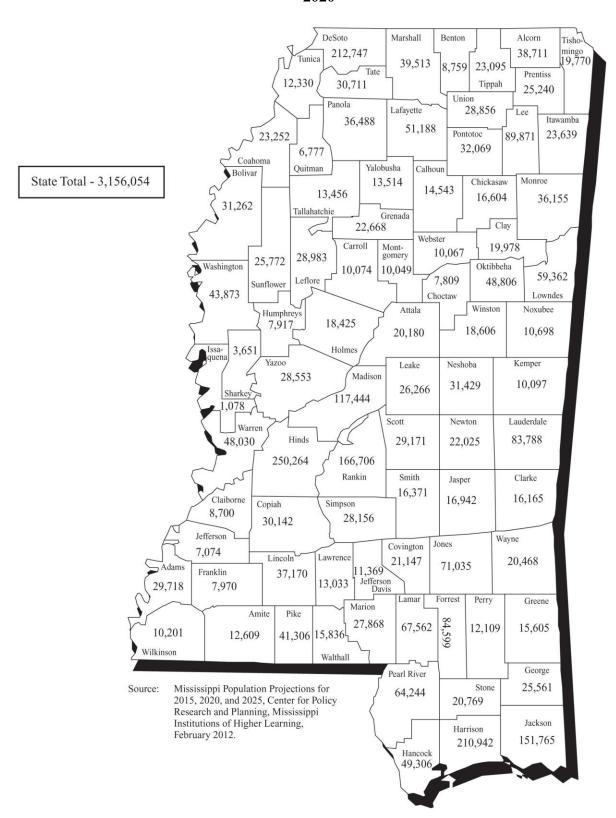
The MSDH may use a variety of statistical methodologies including, but not limited to, market share analysis or patient origin data to determine substantial compliance with projected need and with applicable criteria and standards in this *Plan*.

102 Population for Planning

Population projections used in this *Plan* were calculated by the Center for Policy Research and Planning, Mississippi Institutions of Higher Learning, as published in *MISSISSIPPI*, *Population Projections for 2015, 2020, and 2025*, February 2012. This plan is based on 2020 population projections.

Map 1-1 depicts the state's 2020 estimated population by county. Mississippi population projections for the years 2020 and 2025 can be obtained from the State Institutions of Higher Learning at www.ihl.state.ms.us. (1) Select University Research Center; 2) Economics; and 3) Miss Population Projections)

Map 1-1 Population Projections 2020



103 Health Personnel

High quality health care services depend on the availability of competent health personnel in sufficient numbers to meet the population's needs. Mississippi is traditionally a medically underserved state, particularly in sparsely populated rural areas and areas containing large numbers of poor people, elderly people, and minorities. This section discusses some of the areas of greatest need for health care personnel, focusing on physicians, dentists, and nurses.

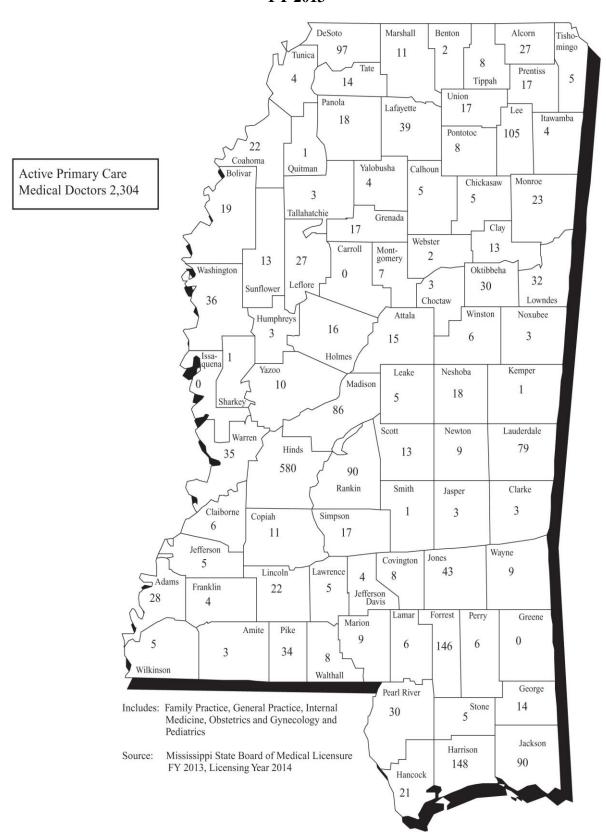
103.01 Physicians

Mississippi had 5,597 active medical doctors, 375 osteopaths, and 70 podiatrists licensed by the Board of Medical Licensure for FY 2013 (licensing year 2014) for a total of 6,042 active licensed physicians practicing in the state. This number represents an increase of 126 physicians, or more than 1.02 percent, from FY 2012 (licensing year 2013).

Approximately 2,304 (41 percent) of the state's active medical doctors are primary care physicians, representing a ratio of one primary care physician for every 1,369 persons, based on 2020 projected population. The primary care physicians included 772 family practitioners, 87 general practitioners, 686 internal medicine physicians, 334 obstetrical and gynecological physicians, and 425 pediatricians. Map 1-2 depicts the total number of primary care medical doctors by county.

According to the Health Resources and Services Administration's Office of Shortage Designation, Mississippi has a total of 139 primary care health professional shortage area (HPSA) designations. Seventy-five of the designations are single county designations. The United States Department of Health and Human Services defines a primary care health professional shortage area (HPSA) as a geographic area that has a ratio in excess of 3,500 persons per primary care physician and insufficient access to those physicians within a 30 minute traveling radius. Also, areas with 3,000 to 3,500 persons per primary care physician that have unusually high needs for primary care services and have insufficient access to primary care doctors within a 30 minute traveling radius, can also be designated as a primary care HPSA.

Map 1 -2 Active Primary Care Medical Doctors by County of Residence FY 2013



103.02 Dentists

The Mississippi State Board of Dental Examiners reported 1,049 licensed (1,022 "active" and 27 "inactive") dentists in the state as of August 2014, with 75 new dentists licensed during calendar year 2013. Based on Mississippi's 2020 projected population of 3,156,054, the state has one active dentist for every 3,008 persons.

The more populated areas of Mississippi are sufficiently supplied with dentists; however, many rural areas still face tremendous shortages. According to the Health Resources and Services Administration's Office of Shortage Designation (HRSA/OSD), Mississippi currently has a total of 140 dental health professional shortage area (HPSA) designations. Seventy-seven of the designations are single county designations.

Mississippi's two major population centers contain the most active dentists. The Jackson area had a total of 318 active dentists in the fall of 2014, with 175 in Hinds County, 97 in Rankin County, and 46 in Madison County. The Gulf Coast region had the second largest count at 158, with 99 in Harrison County, 52 in Jackson County, and 7 in Hancock County. Combined, these two metropolitan areas contained 46.57 percent of the state's total supply of active dentists.

On the opposite end of the spectrum, four counties— Claiborne, Franklin, Jefferson, and Quitman—had only one active dentist each and two counties—Benton, and Issaquena—had no active dentist. Map 1-3 depicts the number of dentists per county and indicates the number of in-state, active, licensed dentists who have mailing addresses in the state.

Active Dentists by County DeSoto 60 Marshall Benton Alcorn Tishomingo 12 5 Prentiss Tippah 6 11 Union Lafayette 10 Itawamba 23 5 Pontotoc 46 Coahoma Yalobusha Quitman Calhoun Bolivar Monroe 3 Chickasaw 5 6 14 16 Tallahatchie Grenada 11 Clay Webster 4 Carroll Mont-14 10 Oktibbeha Washington 3 2 20 6 Leflore 12 15 Choctaw Lowndes Winston Noxubee Attala Humphreys 4 3 5 8 Holmes Yazoo Leake Neshoba Kemper Madison 17 3 12 9 Scott Newton Lauderdale 41 8 15 20 Rankin Smith Clarke Jasper Claiborne 7 6 4 Copiah 1 Jefferson Wayne Jones Covington 9 Lawrence 36 Lincoln Adams Franklin 4 Jefferson Davis 14 Greene Marion Pike Amite 5 3 14 4 3 Wilkinson Walthall Pearl River 16 No Dentist Population Concentration

Map 1-3
Active Dentists by County

Source:

August 2014

Mississippi State Board of Dental Examiners

Jackson

103.03 Nurses

Registered Nurses

The Mississippi Board of Nursing reported 39,425 registered nurses (RNs) licensed in FY 2013 with (34,743) who worked full or part-time in nursing careers. That included 20,399 in hospitals; 3,504 in community, public, or home health; 2,017 in physicians' offices; 1,925 in nursing homes; and the remainder in other nursing careers. RNs by degree in FY 2013 included, 1,623 diploma, 21,396 associates, 1,308 baccalaureate non-nursing, 12,320 baccalaureate nursing, 677 masters non-nursing, 1,833 masters nursing, and 219 doctorate degrees.

Advanced Practice Registered Nurses

Advanced practice registered nurse (APRN) includes any person licensed to practice nursing in Mississippi and certified by the Board of Nursing to practice in an expanded role as an advanced practice registered nurse including nurse midwives and certified registered nurse anesthetists. For FY 2013 there were 3,210 RNs certified as APRNs, with 1,961 family nurse practitioners; 704 certified registered nurse anesthetist; and 110 in adult acute care. The remainder practiced in such specialties as adult and family mental health, gerontology, midwifery, neonatal, pediatric, women's health care and family planning.

Licensed Practical Nurses

The Board of Nursing reported 13,840 licensed practical nurses (LPNs) licensed in FY 2013 with 11,274 who worked full or part-time in nursing careers. That included 4,284 in nursing homes; 1,872 in hospitals; 2,301 as office nurses; 859 in community, public, or home health; and the remainder in other nursing careers. There were 4,392 LPNs certified for an expanded role in FY 2013, including 4,244 in intravenous therapy, 49 in hemodialysis, and 99 in both expanded roles.

Office of Nursing Workforce Redevelopment

The Mississippi Nursing Organization Liaison Committee (NOLC), a committee of the Mississippi Nurses Association composed of representation from 25 nursing organizations, has worked proactively to address nursing workforce issues related to anticipated changes in nursing and the health care delivery system. Through the efforts of the NOLC, the Mississippi Legislature passed the Nursing Workforce Redevelopment Act during the 1996 Session. The Act authorized the Mississippi Board of Nursing to establish an entity that would be responsible for addressing changes impacting the nursing workforce.

Currently, with funding from the legislature and the Mississippi Development Authority, Office of Nursing Workforce Redevelopment (ONWR) is working with the Mississippi Council of Deans and Directors of Schools of Nursing, the Mississippi Nurses Association and the Mississippi Organization of Nurse Executives to address issues vital to nursing. These issues include faculty shortages, barriers to nursing education, recruitment into nursing, scholarship funding, the image of nursing, service/education collaboratives, retention of nursing service employees, and leadership

training for nurses. More information is available by calling ONW or visiting www.monw.org.

103.04 Physical Therapy Practitioners

Physical therapy (PT) practitioners provide preventive, diagnostic, and rehabilitative services to restore function or prevent disability from disease, trauma, injury, loss of a limb, or lack of use of a body part to individuals of all ages.

The Mississippi State Board of Physical Therapy reported 1,829 licensed physical therapists in Mississippi as of April 10, 2014 with 1,552 residing in the state. Eight percent of the Mississippi resident physical therapists practitioners live in Hinds County, five percent in Harrison County, and ten percent in Madison County, for a total of 23 percent in three counties. Mississippi ranks 39th in the United States for the ratio of therapists per 100,000 population. The Board also reported 1008 licensed physical therapist assistants, with 827 practicing in the state.

103.05 Occupational Therapist

Occupational therapy (OT) is a health and rehabilitation profession that serves people of all ages who are physically, psychologically, or developmentally disabled. Their functions range from diagnosis to treatment, including the design and construction of various special and self-help devices. OTs direct their patients in activities designed to help them learn skills necessary to perform daily tasks, diminish or correct pathology, and promote and maintain health.

The MSDH reported 988 licensed occupational therapists and 511 licensed occupational therapy assistants on its Mississippi roster as of April 8, 2014, with 861 of the OTs and 433 of the OTAs residing in the state.

103.06 Emergency Medical Personnel

The training of emergency medical personnel includes ambulance operators and emergency medical technicians (EMTs) of both advanced and basic levels. Mississippi requires all ambulance drivers to have EMS driver certification (EMS-D). To qualify, an individual must complete an approved driver training program that involves driving tasks, vehicle dynamics, vehicle preventative maintenance, driver perception, night driving, and information on different driving maneuvers. This training offers both academic and clinical (practical hands on) experiences for the prospective ambulance driver. In FY 2013, Mississippi issued 1,188 EMS driver certifications or recertification.

Additionally, all emergency medical technicians – both advanced level and basic level – must complete a National Highway Safety and Traffic Administration training program for the respective level. This training provides extensive academic and clinical hours for the prospective students. Upon completion, students must pass the National Registry for Emergency Medical Technicians test and receive their national certification before applying for the Mississippi certification. For FY 2013, the MSDH Bureau of Emergency Medical Services reported issuing a total of 1,184 EMT certifications or recertifications; and 882 Paramedics.

The Legislature authorized the MSDH Bureau of Emergency Medical Services (BEMS) to certify Mississippi's medical first responders beginning July 1, 2004. In fiscal year 2013, BEMS has certified 28 medical first responders.

104 Outline of the State Health Plan

The State Health Plan describes existing services, evaluates the need for additional services in various aspects of health care, and provides Certificate of Need (CON) criteria and standards for each service requiring CON review. These services include: long-term care, including care for the aged and the mentally retarded; mental health care, including psychiatric, chemical dependency, and long-term residential treatment facilities; perinatal care; acute care, including various types of diagnostic and therapeutic services; ambulatory care, including outpatient services and freestanding ambulatory surgical centers; comprehensive medical rehabilitation; home health services; and end stage renal disease facilities.

The Glossary contains definitions of terms and phrases used in this *Plan*.